



MARIJUANA⁺

Honolulu, Memphis, and New Orleans are the only three cities where no *Pulse Check* source names marijuana as their community's most widely abused drug (see *Highlights Exhibit 3*). In the other 17 *Pulse Check* cities, 34 law enforcement, epidemiologic/ethnographic, and non-methadone sources name marijuana as such. Additionally, three non-methadone sources—in Columbia (SC), Seattle, and Sioux Falls—consider marijuana the drug that contributes to the most serious consequences. Compared with the last *Pulse Check* reporting period, the Seattle non-methadone treatment source believes that marijuana has replaced cocaine as the drug contributing to the most serious consequences, and the law

enforcement source in Washington, DC, believes it has replaced crack as the most widely used drug.

MARIJUANA: THE DRUG

How available is marijuana, in its various forms, across the country? (*Exhibits 1, 2, and 3*) As reported in the last several *Pulse Checks*, all but 1 of the 40 law enforcement and epidemiologic/ethnographic sources consider marijuana widely available in their communities. The exception continues to be in Chicago, where the law enforcement source considers the drug somewhat available.

The two most common varieties of marijuana are local commercial grade and Mexican commercial grade. The former is ranked as widely available

by 23 sources in all but 4 of the *Pulse Check* cities (Boston, Chicago, Detroit, and El Paso); the latter is ranked as such by 21 sources in all but 3 cities (Miami, Portland [ME], and Washington, DC)—an increase since the last *Pulse Check*.

Sinsemilla (seedless marijuana) remains the third most common variety (ranked widely available by 16 sources in 12 cities), followed by hydroponically grown marijuana (ranked widely available by 12 sources in 9 cities). British Columbian marijuana ("BC bud") remains the least common variety, with only six sources ranking it as widely available

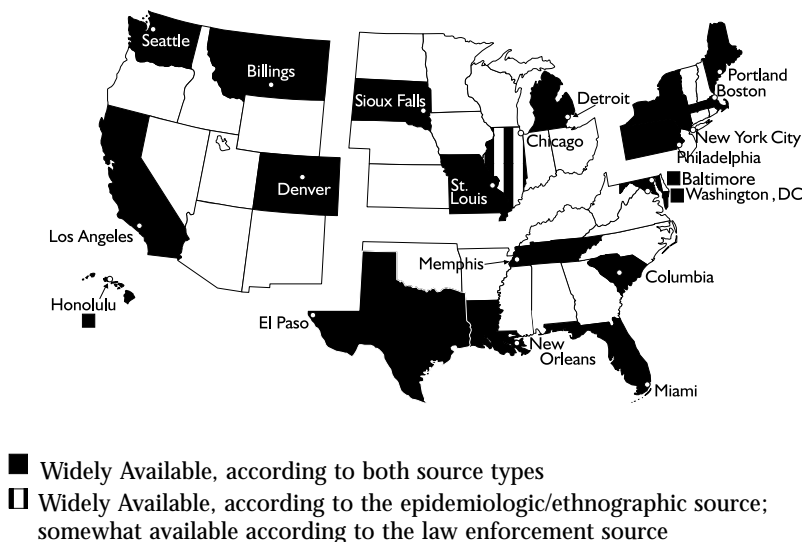
Exhibit 2.

How has marijuana availability changed (fall 2001 vs spring 2002)?

Exhibit 1.

How available is marijuana across the 20 *Pulse Check* cities (spring 2002)?

According to law enforcement and epidemiologic/ethnographic sources (N=40)...

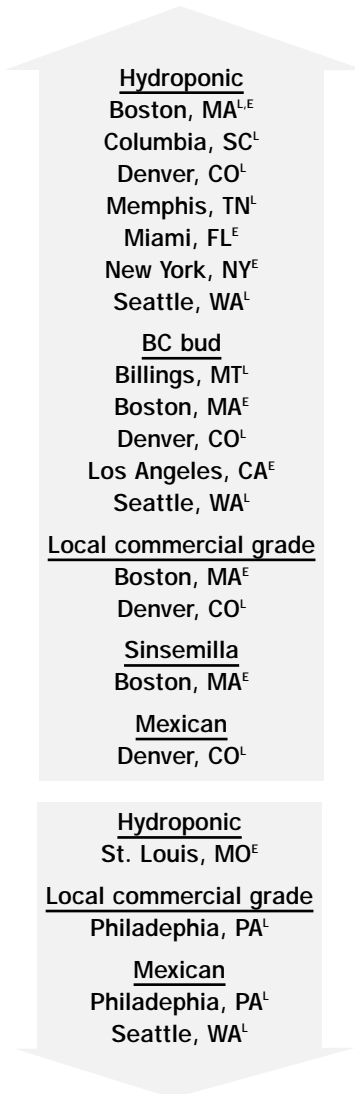


Boston, MA^E
 Denver, CO^L
 Baltimore, MD^{L,E}
 Billings, MT^{L,E}
 Boston, MA^L
 Chicago, IL^{L,E}
 Columbia, SC^{L,E}
 Denver, CO^E
 Detroit, MI^{L,E}
 El Paso, TX^{L,E}
 Honolulu, HI^{L,E}
 Los Angeles, CA^{L,E}
 Memphis, TN^{L,E}
 Miami, FL^{L,E}
 New Orleans, LA^{L,E}
 New York, NY^{L,E}
 Philadelphia, PA^E
 Portland, ME^{L,E}
 Seattle, WA^{L,E}
 Sioux Falls, SD^{L,E}
 St. Louis, MO^{L,E}
 Washington, DC^{L,E}
 Philadelphia, PA^L

⁺The following symbols appear throughout this chapter to indicate type of respondent: ^LLaw enforcement respondent, ^EEpidemiologic/ethnographic respondent, ^NNon-methadone treatment respondent, and ^MMethadone treatment respondent.



Exhibit 3.
Which marijuana varieties have changed in availability (fall 2001 vs spring 2002)?



in four cities: Baltimore, Billings, New York, and Seattle.

Since the last reporting period, availability of marijuana in general has remained stable, with only two perceived increases and one perceived decline, as shown in the first arrows. Similarly, the numerous varieties have remained generally stable in availability, although a few shifts are noted

(in the second arrows), particularly increases in hydroponic marijuana and BC bud. The latter variety has increased mostly in the West.

How is domestic marijuana grown? Indoor and outdoor growing operations ("grows") are reported about equally:

- **Indoors:** Billings^L, Boston^L, Denver^L, Memphis^L, Miami^{L,E}, New Orleans^E, New York^L, Philadelphia^L, St. Louis^L, and Seattle^{L,E}
- **Outdoors:** Baltimore^L, Honolulu^L, Los Angeles^L, Memphis^E, New Orleans^L, St. Louis^E, Sioux Falls^{L,E}, and Washington, DC^L
- **Both:** Chicago^L, Denver^L, Detroit^{L,E}, Honolulu^E, New York^E, Portland^{L,E}, and Washington, DC^E

A few shifts are reported since the last *Pulse Check*:

- **Boston, MA^L:** Increases are noted in the number of indoor hydroponic grows, the amount grown, and THC levels. Most marijuana, however, continues to come from Canada via Hell's Angels.
- **Denver, CO^L:** While most marijuana is grown locally indoors, bigger loads have been coming in from Mexico.
- **Miami, FL^L:** Indoor grows continue to be popular, sometimes in gated communities, sometimes in houses rented specifically for growing. Since the last reporting period, Cuban refugees have become increasingly involved in marijuana grow houses.
- **Philadelphia, PA^L:** While local indoor grows are still not common, they are increasing.

■ **Portland, ME^L:** Marijuana growing continues to become more sophisticated, with new seedlings moved indoors for the winter and then moved outdoors again in the spring.

■ **Sioux Falls, SC^E:** Outdoor grows are influenced by weather and seasonal changes.

■ **Washington, DC^L:** Hidden outdoor grows are increasing.

Have street-level prices and adulteration changed across the country? (*Exhibit 4*) Prices and purity levels have remained generally stable since the last reporting period, with a few exceptions. Five shifts involve increases:

- **Billings, MT^L:** The gram price has increased slightly from \$5 to \$10–\$20, depending on quality
- **Boston, MA^L:** Marijuana continues to increase in potency and price.
- **Miami, FL^L:** Pound prices have increased from \$4,000 to \$5,000.
- **New York, NY^E:** Purity has increased.
- **Portland, ME^E:** Both purity and prices have increased.

Three shifts involve declines:

- **Chicago, IL^E:** Prices have declined at the lower end of the range.
- **El Paso, TX^L:** Pound prices have declined from \$445–\$300 to \$275–\$300.
- **Honolulu, HI^E:** Pound prices have declined considerably.

Only a few THC levels are reported: 15–22 percent per gram of sinsemilla in Honolulu; 4–6 percent for Mexican grade and 25 percent per



mid-grade ounce in Los Angeles; and 2–3 percent per pound of Mexican, 12–18 percent per pound of domestic indoor hydroponic, and 15–25 percent per pound of BC bud in Seattle. Marijuana is sometimes sold with adulterants, with a few instances reported this period:

- **Columbia, SC^{N,M}:** Marijuana is laced with crack, PCP (“chronic”), or “embalming fluid (“wet joints”). PCP-laced joints are increasing.
- **Miami, FL^M:** Some dealers lace marijuana with cocaine to get customers to return. The buyers assume “it’s just especially potent marijuana.”
- **Washington, DC^M:** Adulterants include embalming fluid and baby oil.

Have marijuana slang terms changed across the country? (*Exhibit 5*) Among the many slang terms for marijuana, marijuana smoking, and marijuana combinations, only a few are new: “chronic” in Chicago; “schwagg” and “spliff” in Memphis; and “crank” in Washington, DC.

MARIJUANA: THE MARKET

Who sells marijuana? As reported in past *Pulse Checks*, marijuana sellers are more likely to operate independently than as part of organized operations. However, organizations with varying degrees of structure do exist in several cities, such as Memphis, Miami, and New Orleans in the South, Chicago and Detroit in the Midwest, and Billings in the West.

The vast majority of *Pulse Check* law enforcement and epidemiologic/ethnographic sources continue to report that marijuana sellers are somewhat or very likely to use their

Exhibit 4. How much does marijuana cost in 19 *Pulse Check* cities?*

MOST COMMON STREET UNIT					1 OUNCE
City/Source	Type	Unit	Price		Price
Northeast	Boston, MA ^E	Commercial	0.125 oz	\$20	\$100–\$125
			0.33 oz bag	\$50	NR
	Boston, MA ^L	Sinsemilla			\$80–\$100
	New York, NY ^E	Commercial	bag	\$10	NR
		Hydroponic	bag	\$20	NR
	New York, NY ^L	Commercial			\$100–\$200
		Hydroponic or sinsemilla			\$300–\$1,200
South	Philadelphia, PA ^E	NR	bag, blunt	\$5	NR
	Philadelphia, PA ^L	Commercial			\$150–\$200
	Portland, ME ^L	NR	joint	\$5	\$175–\$225
	Baltimore, MD ^L	NR	joint	\$1–\$3	\$100
	Columbia, SC ^L	Mexican or local commercial	dime bag, 3–4 g	\$10	\$180
	El Paso, TX ^E	NR	bag, five joints	\$20	NR
	El Paso, TX ^L	Mexican commercial	0.25 oz	\$20	NR
	Memphis, TN ^E	Commercial	joint	\$5	\$100
			quarter bag	\$25	NR
	Memphis, TN ^L	NR	0.25 oz	\$25	\$100
Midwest	New Orleans, LA ^E	NR	joint	\$7	NR
	New Orleans, LA ^L	NR	joint	\$5	\$300
	Washington, DC ^E	Commercial	bag, several joints	\$5–\$10	\$100
			blunt	\$10–\$20	
		Hydroponic	NR	NR	\$480
	Washington, DC ^L	NR	20–bags	\$20	NR
	Chicago, IL ^E	NR	loose bag	\$5–\$10	\$80–\$200
	Detroit, MI ^E	NR	0.25 oz	\$200	NR
			one joint	\$2–\$6	
	Detroit, MI ^L	NR	bag, 1 g	\$10	NR
West	St. Louis, MO ^L	NR	small bag	\$20	\$100
	Sioux Falls, SD ^L	Mexican commercial			\$100–\$200
		BC bud			\$400
	Billings, MT ^L	NR	1 g	\$10–\$20	NR
	Denver, CO ^L	NR	NR	NR	\$100–\$200
	Denver, CO ^E	BC bud	NR	NR	\$600
	Honolulu, HI ^E	NR	joint	\$5–\$20	NR
			1 g	\$25	NR
	Honolulu, HI ^L	Sinsemilla	1 g	\$25	NR
	Los Angeles, CA ^E	Mexican commercial	1 g	\$10	\$60–\$80
		Mexican mid grade	1 g	\$25	\$200–\$250
	Los Angeles, CA ^L	Mexican	dime bag, 1 g	\$10	NR
	Seattle, WA ^E	NR	1 g	\$10–\$20	\$400

*Respondents in Miami did not provide this information.

NR = not reported

Sources: Law enforcement and epidemiologic/ethnographic respondents



MARIJUANA

Exhibit 5.

How is marijuana referred to in the four regions of the country?*

WEST	MIDWEST	NORTHEAST
Bud, grass, herb, mary jane, pot, smoke, weed, babysitter, chemo, colas, firewood, pakaloco, (crazy tobacco), salad, skunk, chronic (bc bud), crip, triple a (bc bud), kind bud (high quality), ragweed, skunkweed, swag (low quality), kona gold, kawaii electric, maui wowie	Bud, grass, green, mary jane, pot, reefer, smoke, weed, blunts, chronic , nickel bags (\$5 bags), LG (lime green), hydro, chiefing (smoking marijuana)	Bud, doobie, dope, pot, ganja, grass, herb, jay, mary jane, reefer, smoke, trees, weed, arizona, blunt, bone, chronic, gorge, hash, hash oil, homegrown, hydro, joint, loose shank, purple haze, roach, scrub, sinse or sins (sinsemilla), vermont, blazing (smoking marijuana)
SOUTH		
Bud, doobie, dope, fire, herb, ganja, grass, green, jane, mary jane, pot, smoke, trees, weed, blow, bush, clover, crank , dip, mota, salad, schwagg , red bud (hydroponic), bubbleberry (hydroponic), gold bud, hydro, teak (hydroponic), ink (hydroponic), kryptonite or krippy (high-grade hydroponic), ragweed (low grade), ditchweed (low grade), kindbud, THC, chronic (PCP laced), wet joints (embalming fluid laced), macaroni, macaroni and cheese (\$10 of cocaine and \$5 pack of marijuana), blunt, spliff , baggies		

* Bolded names are new this reporting period.

Sources: Law enforcement, epidemiologic/ethnographic, and treatment respondents

own drug, much more so than sellers of other drugs (see *Highlights Exhibit 8*). The majority of sources also continue to report young adults (18–30 years) as the predominant sellers. Adolescents, however, are named as such in Baltimore^E and New Orleans^L. Both adolescents and young adults are named by some sources (as in Billings^L, Chicago^E, Honolulu^E, Los Angeles^{L,E}, Memphis^E, and New Orleans^E), while both young adults and adults older than 30 are named by others (in Boston^L, El Paso^L, St. Louis^{L,E}, and Sioux Falls^L). All three age groups are named in Baltimore^L. Since the last *Pulse Check*, adolescent sellers have been increasing in Memphis^E.

What types of crimes are related to marijuana sales? Marijuana sellers are more likely to be involved in nonviolent crimes, such as theft, robbery, and burglary, than in violent crimes. The drug is seldom associated with rape, domestic violence, or prostitution (see *Highlights Exhibit 7*). When violent crime is reported, it is

sometimes associated with organized rather than independent dealers, as in St. Louis. In Sioux Falls, any violent crime involving marijuana sales typically also involves methamphetamine. One change for the worse is reported since the last *Pulse Check*: in Memphis, marijuana sales have been increasingly associated with gang-related violent crimes, such as murders and shootings.

How and where do marijuana markets operate? Marijuana sales often involve acquaintance or referral networks, posing a challenge to law enforcement disruption efforts. The actual exchanges are usually hand-to-hand, sometimes at prearranged meetings (as in Chicago, Columbia [SC], Honolulu, Memphis, and Washington, DC) or via home delivery (as in Boston, El Paso, Portland [ME], and Seattle). Beepers and cell phones are sometimes involved (as in Boston, Honolulu, Los Angeles, Memphis, New Orleans, Seattle, and Sioux Falls). Open-air markets still exist in some cities (such as Chicago,

Honolulu, New Orleans, Philadelphia, Seattle, and Washington, DC), although sometimes they are held in more discreet areas of public housing developments (as in Chicago, New Orleans, and Washington, DC).

As reported in past *Pulse Checks*, marijuana, more than other drugs, tends to be sold both indoors and outdoors and in all types of geographic areas—central city, suburban, and rural. The specific market settings remain varied, with only a handful of changes since the last *Pulse Check*:

- **Boston, MA^L**: Sales continue to move more underground than in the past, with an increasing use of beepers.
- **Detroit, MI^L**: Sales have increased in sheer volume.
- **Memphis, TN^E**: More outdoor sales are reported, but the number of sales settings has declined. Sales around stores or treatment clinics, reported in the past, are not reported during this period.
- **New Orleans, LA^E**: The marijuana market, once limited to public housing projects, has spread to all parts of the city.
- **Philadelphia, PA^L**: Operation Safe Streets has generated much market movement, both indoors and to other street corners. This movement has had two effects: when markets move indoors, law enforcement can target specific homes; and out-of-town buyers have become particularly confused when they see the visible police presence, and they do not know where to “score.”

What other drugs are associated with marijuana sales? About half of reporting law enforcement and



epidemiologic/ethnographic sources report that marijuana dealers sell no other drugs. In St. Louis, the gang-related distributors sell other drugs, while the independent low-level dealers do not. Conversely, in Sioux Falls, larger marijuana dealers sell only marijuana, while other dealers sell crack or methamphetamine as well. In Chicago, heroin and cocaine are sometimes sold on the same streets as marijuana, but not by the same people. The drugs most commonly reported as sold by marijuana dealers, in descending order of frequency, are as follows:

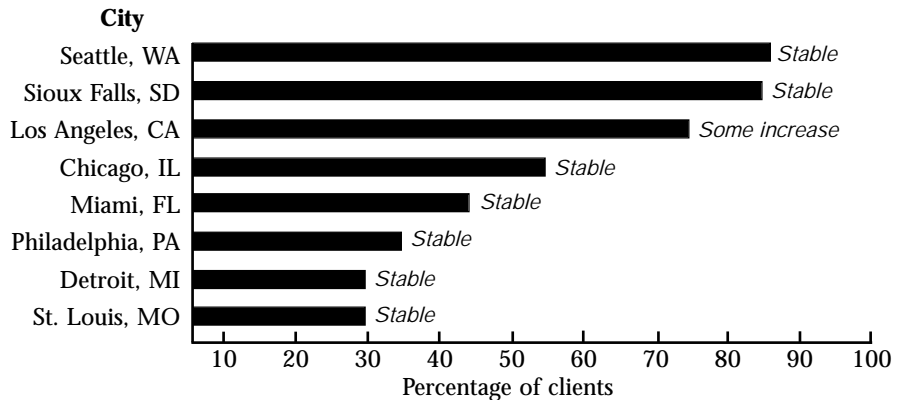
- **Crack:** Columbia (SC)^L, Denver^E, Honolulu^L, New Orleans^{L,E}, New York^L, St. Louis^E, and Sioux Falls^L
- **Powder cocaine:** Columbia^L, Denver^E, Honolulu^L, Memphis^L, Miami^L, and New York^L
- **Heroin:** Baltimore^L, Denver^E, New Orleans^L, New York^L, and St. Louis^E
- **Ecstasy:** Denver^L, Honolulu^L, Miami^{L,E}, and New York^L
- **Methamphetamine:** Billings^L, Denver^{L,E}, Honolulu^L, and Sioux Falls^L
- **Flunitrazepam (Rohypnol[®], or "roches"):** El Paso^E

MARIJUANA: THE USERS

How many marijuana users are in treatment, and how do they get there? (*Exhibits 6 and 7*) Marijuana use by clients in treatment has remained relatively stable in most *Pulse Check* cities since the last reporting period. The drug accounts for sizable proportions of clients in treatment at non-methadone programs represented by several *Pulse Check* sources, as shown in the graph. Furthermore, these percentages are

Exhibit 6.

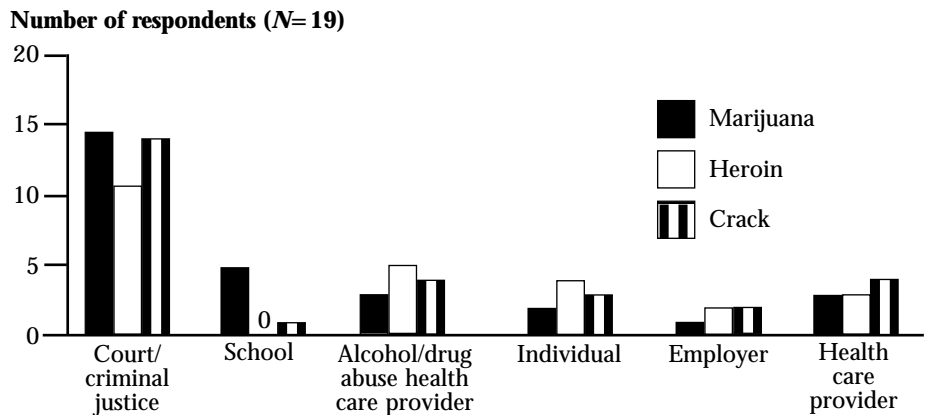
Which non-methadone treatment programs in *Pulse Check* sites have substantial percentages* of clients reporting marijuana as their primary drug of abuse? How have those percentages changed (fall 2001 vs spring 2002)?



*30 percent or more

Exhibit 7.

How are different drug users referred to treatment?



Sources: Non-methadone treatment respondents

Note: Many respondents list more than one referral source.

even higher when including all use, whether primary, secondary, or tertiary. For example, 100 percent of the clients in the Seattle and Sioux Falls programs report any marijuana use. In methadone programs, virtually all marijuana use is secondary or tertiary.

Marijuana users are predominantly referred to treatment through courts or the criminal justice system, more so than users of other drugs, as

reported in past *Pulse Checks*. School referrals to treatment are also more likely among marijuana users than among users of other drugs. Referral sources have remained generally stable since the last reporting period, with three exceptions:

- **New York, NY^M:** More people are being referred through the parole system.

- **Portland, ME^N:** Referrals from other health providers have been increasing.
- **Sioux Falls, SD^N:** More self-referrals and family referrals are reported.

Who uses marijuana? (*Exhibits 8 and 9*) While young or older adults are most frequently reported as the predominant marijuana-using group, several sources report adolescents as such: Baltimore^E, Chicago^N, Columbia (SC)^{M,N}, El Paso^{E,N}, Denver^E, Los Angeles^E, and New Orleans^E. An additional 11 sources report adolescents along with one or both older age groups as the predominant group. Moreover, one source in Sioux Falls^N, reports adolescents along with preadolescents (< 13 years).

As the table shows, the differences between the populations described by epidemiologic/ethnographic, non-methadone treatment, and methadone treatment sources are particularly apparent with regard to marijuana. Marijuana users also differ in many ways from users of other drugs. For example, as the graph shows, they are more likely to reside in all locations (central city, suburban, and rural areas), rather than be concentrated in just one or two areas.

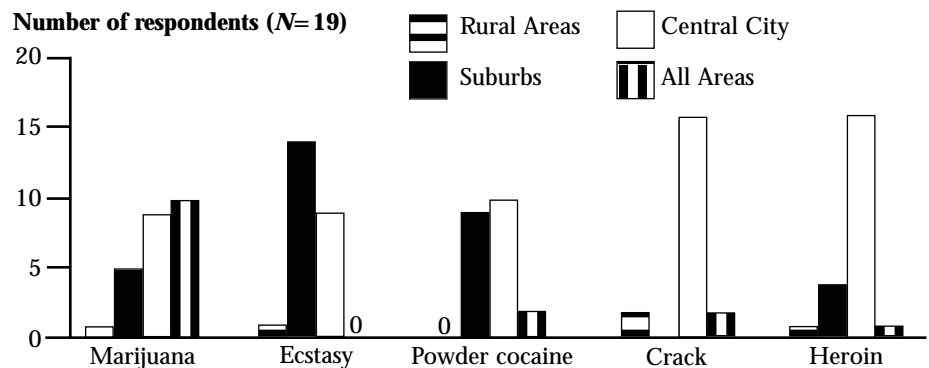
How do users take marijuana? Joints remain the most common vehicle for smoking marijuana, as reported in past *Pulse Checks*. However, blunts (hollowed-out cigars filled with marijuana) are more common than joints in many cities, such as Baltimore^N, Chicago^N, Columbia (SC)^N, Memphis^N, New Orleans^E, New York^E, and Philadelphia^{E,N}. Other, less commonly reported delivery systems include pipes (in Columbia^N, Denver^E, Los Angeles^N, Memphis^E, and Sioux Falls^E), bongs (in Denver^E, Honolulu^N,

Exhibit 8.
Who is most likely to use marijuana?

Different source groups deal with quite different populations. Thus, each group paints a slightly different picture of the kind of people most likely to use marijuana...

Predominant user characteristic	Epidemiologic/ethnographic sources tend to report...	Non-methadone treatment sources tend to report...	Methadone treatment sources tend to report...
Age	Cuts across all groups	Young adults	Older adults
Average mean age	22.25 (n= 11)	22.85 (n= 7)	35.8 (n= 6)
Gender	Half report males; half report even gender splits	Males (but 7 report equal gender splits)	Males (only 3 report equal gender splits)
Race/ethnicity	Varies widely	Varies widely	Varies widely
Socioeconomic status	Cuts across all groups	Low	Low
Residence	Cuts across all areas	Central city	Central city
Education (highest level completed)	NR	Junior high and high school equally likely	High school
Employment	NR	Student or unemployed	Unemployed

Exhibit 9.
Where are drug users most likely to reside?



Sources: Epidemiologic/ethnographic respondents Note: Some respondents list two areas per city.

Los Angeles^E, and Seattle^N), and bowls (in Columbia^N and Los Angeles^E). Wraps, made of either tobacco leaves or colored or flavored papers, are a more recently reported vehicle for smoking marijuana (in El Paso^E, Miami^M, Philadelphia^E, and Washington, DC^E).

A few shifts are noted since the last report:

- **Boston, MA^N:** Blunts are becoming more common.

- **Boston, MA^E:** Blunt wraps are increasing, while there is a movement away from paper.
- **El Paso, TX^E:** Use in joints has been declining as colored and flavored papers are becoming more common.
- **Memphis, TN^N:** Blunts have been increasingly used for the past 5 years. They have now become more common than joints.



The nature of marijuana users is changing in some cities (fall 2001 vs spring 2002)...

Since the last reporting period, no changes are reported in socioeconomic status or place of residence. A few shifts are reported, however, in age, gender, race/ethnicity, and employment status.

Several age shifts reflect a decline in the age of marijuana users:

- **Boston, MA^N:** While this specific program is only for people older than 18, other programs are showing an increase in adolescent users.
- **Columbia, SC^E:** An increasingly younger population was seen last reporting period, and this trend has continued.
- **Honolulu, HI^E:** The number of young adult users in treatment is increasing.
- **Los Angeles, CA^N:** The number of younger users is increasing.
- **Memphis, TN^N:** The number of preadolescent users in the community, outside of the program, is increasing.
- **Sioux Falls, SD^N:** The number of preadolescent (< 13 years) and adolescent (13–17 years) users is increasing.

Only one gender shift is reported:

- **Memphis, TN^E:** The number of female users has increased.

Racial/ethnic distributions have remained relatively stable, with two exceptions:

- **El Paso, TX^M:** While marijuana users are primarily Hispanics, more White people are being seen.
- **Memphis, TN^E:** Marijuana use, equally common among both Blacks and Whites, has increased among both groups.

Two treatment sources note changes in their clients' employment status:

- **New York, NY^M:** While users are still predominantly unemployed, employment has increased slightly, both at admission and during treatment. Parolees tend to be employed more.
- **Sioux Falls, SD^N:** The number of unemployed clients has increased, as has the number who are marijuana dealers.

■ **Miami, FL^M:** Blunts are increasing, and blunt wraps are a new phenomenon.

■ **Philadelphia, PA^E:** People are switching daily from blunts to flavored blunt wraps. Sales outlets are becoming more prevalent, and these places are staying open later.

■ **Washington, DC^E:** Blunts are becoming less common. Joints are “in,” and flavored papers for joints are becoming more popular.

A market strategy aimed at girls...

El Paso, TX^E: Sold at convenience stores, headshops, and drug stores, particularly in the downtown area, wraps are longer than regular cigarette joint papers. They are particularly aimed at girls, who like the various colors and flavors, such as strawberry, banana, and orange.

Where and with whom is marijuana used? Only one change is reported since the last *Pulse Check*: in El Paso, users are smoking marijuana more openly, in broad daylight, in public places, whereas in the past, use tended to be more private. Elsewhere, as reported in the last *Pulse Check*, epidemiologic/ethnographic and non-methadone treatment sources generally continue to agree that marijuana is equally likely to be used either publicly or privately. Methadone treatment sources, however, still tend to report more private than public use. Most sources also report either that users are more likely to smoke marijuana in small groups rather than alone, or else that small-group use and solo use are equally likely. However, five sources report solo use as more likely, and four of those five are methadone treatment

sources (from Chicago, El Paso, New York, and Seattle). The variety of specific use settings reported by all sources is innumerable.

What other drugs do marijuana users take? Three new developments are reported since the last *Pulse Check*:

■ **El Paso, TX^E:** A new drug is being used with marijuana: ketamine (“special K”).

■ **El Paso, TX^M:** Clients are smoking joints laced with cocaine.

■ **New Orleans, LA^E:** Use of marijuana laced with PCP is making a comeback.

Elsewhere, marijuana frequently continues to be used with alcohol, and it continues to be smoked with a



variety of other substances, either sequentially or in combination:

- **Benzodiazepines:** Boston, Memphis, and Philadelphia
- **Club drugs (such as ecstasy, ketamine, LSD):** Boston, Columbia (SC), El Paso, Los Angeles, and Portland (ME)
- **Crack:** Chicago, Columbia, Denver, Honolulu, Memphis, New Orleans, New York, Philadelphia, and St. Louis (Crack combined with marijuana is referred to as “primos” in Denver and Memphis and “turbos” in Philadelphia.)
- **Formaldehyde:** Seattle (“Sherms” or “s” refer to this combination.)
- **Heroin:** Boston, Chicago, El Paso, Miami, New Orleans, New York, and Portland (ME) (In New York, “woolie” or “woola blunt” are slang names for heroin and marijuana in combination.)
- **Methamphetamine:** Billings, Denver, Honolulu, and Sioux Falls
- **Other opiates:** Boston, Memphis, and Philadelphia
- **PCP:** Chicago, Los Angeles, New Orleans, Philadelphia, Portland, and Sioux Falls (PCP in combination with marijuana is called “joy stick” or “happy stick” in Boston and “loveboat” or “wet” in Philadelphia.)
- **Powder cocaine:** Boston, El Paso, Honolulu, Memphis, Miami, New York, and Philadelphia (“Greek” refers to this combination in Miami.)

What are the consequences of marijuana use? (*Exhibit 10*) In trying to assess the consequences of marijuana use, many factors come into play, including the other drugs

sometimes combined with marijuana. However, as the following examples indicate, some *Pulse Check* sources do note adverse consequences—sometimes medical, sometimes societal—involving the marijuana-using populations with whom they have contact:

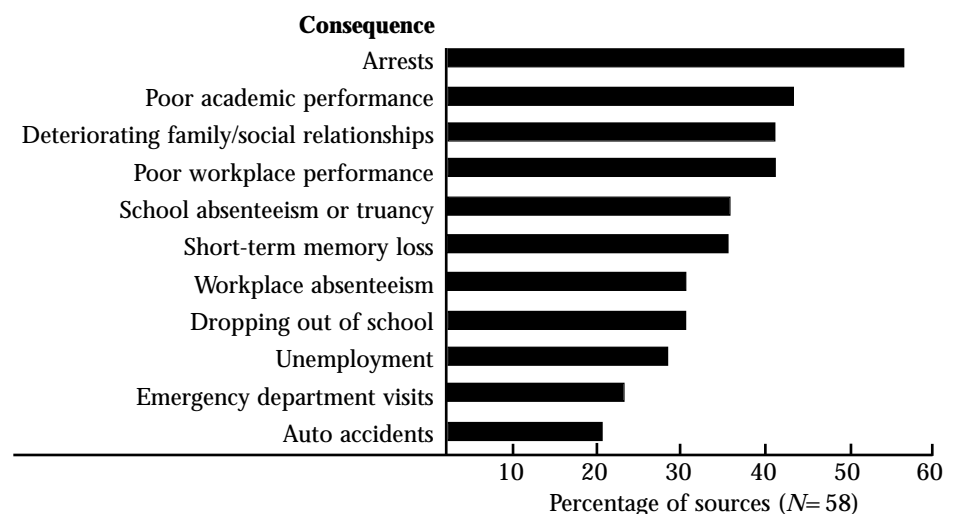
- **Baltimore, MD^M:** A high percentage of clients have asthma, and marijuana makes the condition worse.
- **Boston, MA^N:** Clients who use marijuana have reduced incentive, and some even experience paranoia.
- **Los Angeles, CA^N:** Non-motivation is a problem among marijuana-using clients.
- **Memphis, TN^E:** Several marijuana dealers involved in gang-related crimes have been shot.
- **Miami, FL^E:** Marijuana is associated with high-risk sexual behavior in adolescents. It has been detected,

often without other drugs, in many adolescent and young adult homicide victims. Among recent marijuana-related emergency department episodes, substantial percentages have been reportedly due to (in descending order) depression or suicide ideation, psychotic episodes (such as hallucinations, anxiety, bizarre behavior, or delusions), trauma (accidents), altered mental status, and chest pain.

- **New York, NY^M:** Clients who use marijuana are more likely to experience depression.
- **Philadelphia, PA^E:** Emergency department visits involving marijuana have increased. Philadelphia now has the highest rate in the country.
- **Sioux Falls, SD^N:** Mental health issues have been increasing among marijuana-using clients, including new admissions.

Exhibit 10.

What adverse consequences do substantial percentages* of *Pulse Check* sources attribute to the use of marijuana, either alone or in combination with other drugs?



* > 20 percent

Sources: Epidemiologic/ethnographic, non-methadone treatment, and methadone treatment respondents